

# Fellowships, Grants, & Awards

## **Cancer Prevention, Control, Behavioral, and Population Sciences Career Development Award**

The purpose of the Cancer Prevention, Control, Behavioral, and Population Sciences Career Development Award is to support the career development of investigators who wish to focus their research endeavors on cancer prevention, control, and behavioral and population sciences. This mechanism provides support for 3–5 years of specialized didactic study and mentored research for individuals with a health professional or science doctoral degree who are not fully established investigators. Examples of relevant disciplines for this program announcement (PA) include any aspect of human cancer prevention (modifiable risk factors, new animal models and extrapolation of these models to human cancer, genetic predisposition to cancer and detection of precursor lesions, chemoprevention trials in human populations, and behavioral research and behavioral intervention trials in cancer prevention), epidemiology (biochemical, genetic, and molecular), biostatistics, human cancer genetics, clinical oncology, human nutrition, behavioral and social sciences, health promotion, health services and health policy research, and medical decision analysis, survivorship, and quality of life as they relate to cancer.

The award provides support for up to five consecutive 12-month periods. A minimum of 75% effort must be devoted to the program. The remaining 25% can be divided among other clinical and teaching activities and coursework only if these activities are consistent with the program goals. Both the didactic and research phases of the award are expected to develop necessary knowledge and research skills in scientific areas relevant to the career goals of the candidate in cancer prevention, cancer control, and behavioral and population sciences research. Candidates lacking skills in data management, statistics, epidemiology, study design, clinical trial design, hypothesis development, etc. can be provided the opportunity to participate in courses designed to overcome these deficiencies.

The award provides a career development opportunity for 1) individuals already proficient in general epidemiology, the behavioral sciences, or other relevant disciplines, and 2) individuals already trained in cancer epidemiology, etiology, prevention, control, and the behavioral and population sciences to become fully independent investigators. The scope of the research/didactic training may extend from the development and experimental testing of hypotheses, through the stage of confirming results using defined populations, to the development and demonstration of technology as applied to epidemiology, cancer prevention, cancer control, and the behavioral and population sciences as they relate to cancer.

This PA will use the NIH K07 award mechanism. The total project period for applications may not exceed 5 years. Awards made for a 5-year project period, or recommended by peer review for a shorter project period, are not renewable.

Applications are to be submitted on the grant application form PHS 398 (rev. 5/2001), available online at <http://grants.nih.gov/grants/funding/phs398/phs398.html>, and should use the instructions in Section IV of the application kit. The application will be accepted at the standard application deadlines for K-awards as indicated in the application kit. For further assistance, call 301-435-0714 or e-mail [GrantsInfo@nih.gov](mailto:GrantsInfo@nih.gov). Further information on the PA is available online at <http://grants.nih.gov/grants/guide/pa-files/PA-01-135.html>.

Contact: Brian Kimes, Cancer Training Branch, National Cancer Institute, 6116 Executive Boulevard, Suite 7001, MSC 8345, Bethesda, MD 20892-8346 USA, 301-496-8537, fax: 301-402-0181, e-mail: [bk34t@nih.gov](mailto:bk34t@nih.gov). Reference: PAR No. PAR-01-135

## **Development of Watershed Classification Systems for Diagnosis of Biological Impairment in Watersheds**

The U.S. Environmental Protection Agency (EPA) Office of Research and Development solicits grant applications for establishing watershed classification schemes in different U.S. regions to support the design of efficient monitoring strategies, diagnose the causes of biologic impairment, and prioritize watersheds for restoration activities. This will involve defining both the structural characteristics of a classification strategy (geographic dependence versus independence, scale, hierarchy, discrimination of natural features from anthropogenic alteration), functional characteristics (theoretical basis for defining categories), and pragmatic aspects of implementation (regional and national relevance, ease of application, flexibility, accuracy, and nature of technical transfer products).

This request for applications (RFA) seeks to address the development of methods to assess differences in ecosystem vulnerability to stressors and differences in restoration opportunities within a watershed context. The EPA is interested in building on current classification work by developing the strong underlying basic science that establishes a conceptual understanding of how baseline aquatic ecosystem condition relates to watershed attributes (physical, climatic, and terrestrial) and how anthropogenic activity alters baseline conditions. Research completed through this RFA will enhance the ability of state, tribal, and local agencies to protect the nation's waters.

The outcome of the research will help address these questions: 1) how can regionalized watershed classification schemes be developed within the context of a national framework to determine ecosystem vulnerability and opportunities for watershed restoration; 2) to what degree can ecologically relevant flow-regime metrics, including those describing base-flow and peak-flow conditions, be predicted based on watershed characteristics; 3) how can functional relationships between watershed attributes and hydrologic, water quality, and biologic responses at different scales be incorporated into a hierarchical classification scheme to predict regional, watershed, and water-body scale sensitivities to aquatic nonpoint source stressors; 4) to what degree can the sensitivity of aquatic ecosystems to the effects of anthropogenic changes to watersheds be predicted based on the inherent biophysical characteristics of watersheds; and 5) to what degree can relationships be quantified between hydrologic regime and nonpoint source pollution processes, such as sediment yields, nutrient loadings, aquatic thermal regimes, and riparian and in-stream habitat structure and quality, in a watershed.

Responses to this solicitation must also address how classification schemes and response models will be tested, either through analysis of existing data or through collection of new data. Preferably, collection of new data will be linked to existing monitoring programs, through collaboration with local, state, or tribal agencies, or watershed management or other nonprofit organizations. Proposers must discuss how difficult,

expensive, or practical it would be for others, specifically state monitoring programs, to apply the classification methodology themselves. Ideally, watershed classification schemes will rely on the use of readily available GIS data or attributes that can be readily derived from such data so that they can be applied in the near term by public agencies. Proposals must include a means to assess the level of accuracy associated with a watershed classification system. Quality assurance plans will need to address how a classification system will meet proposed data quality objectives for a given quality assurance program plan management entity. This will help facilitate coordination with existing regional, state, or tribal monitoring organizations. Proposals also must specifically address how the watershed classification schemes will support more efficient monitoring efforts, improve diagnosis of causes of biologic impairment, and/or prioritize watershed restoration efforts. The nature of products must be clearly defined, e.g., whether the proposals will result in a solid, easily applied classification methodology, a classified set of watersheds for a given region, a database, and/or an expert system tool for classification.

It is anticipated that a total of approximately \$4 million, including direct and indirect costs, will be awarded, depending on the availability of funds. The EPA anticipates funding approximately five grants under this RFA. The projected award range is \$150,000–300,000 per year (\$450,000–900,000 per grant) total costs for up to 3 years, depending on whether new field data are collected.

A set of special instructions on how applicants should apply for a National Center for Environmental Research (NCER) grant is found on the NCER Web site at <http://es.epa.gov/ncer/rfa/forms/downlf.html>. The need for a sorting code to be used in the application and for mailing is described in the Standard Instructions for Submitting a STAR Application. The sorting code for applications submitted in response to this solicitation is 2002-STAR-B1. The deadline for receipt of the applications by the NCER is 30 January 2002. Further information on this PA is available online at <http://es.epa.gov/ncer/rfa/02newwatclass.html>.

Contact: Bill Stelz, Mail Code 8723R, U.S. EPA Headquarters, Ariel Rios Building, 1200 Pennsylvania Avenue NW, Washington, DC 20460 USA, 202-564-6834, e-mail: [stelz.william@epa.gov](mailto:stelz.william@epa.gov) (e-mail communication preferred). Reference: 2002-STAR-B1

## **Cooperative Planning Grant for Cancer Disparities Research Partnership**

The National Cancer Institute (NCI) invites cooperative planning grant applications (using the U56 mechanism) in an effort to strengthen the national cancer program by developing models to reduce significant negative consequences of cancer disparities seen in certain U.S. populations. This grant will support the planning, development, and conduct of radiation oncology clinical research trials in institutions that care for a disproportionate number of medically underserved, low income, ethnic, and minority populations but have not been traditionally involved in NCI-sponsored research. The grant will also support the planning, development, and implementation of nurturing partnerships between applicant institutions and committed and experienced institutions actively

involved in NCI-sponsored cancer research. All approaches to planning are encouraged, as long as they address the following essential features: a focus on cancer disparities, radiation oncology clinical research, institutional commitment, organizational capabilities, facilities, and interdisciplinary coordination and collaboration.

The four overall objectives and scope of this request for applications (RFA) are to solicit cooperative planning grants that would 1) build and stabilize independent and collaborative clinical research capabilities of institutions providing radiation oncology care to populations experiencing the negative consequences of cancer-related health disparities; 2) increase the number of clinical scientists engaged in radiation oncology research by providing access to and participation in clinical trials with the target populations; 3) improve the effectiveness of the applicant institution and its partner institution in developing and sustaining activities focused on radiation oncology clinical research trials and mortality and morbidity in cancer among the target populations, continuing past the life of this grant; and 4) establish priorities for and initiate stable, long-term collaborations and partnerships that will strengthen competitive cancer research, research training and career development, education, and outreach capabilities at both the applicant institution and the partner institution that address problems and issues relevant to the disproportionate cancer incidence and mortality.

The most significant components of a U56 Cancer Disparities Research Partnership application are 1) a thorough description and implementation plan of the proposed radiation oncology clinical trials research effort that must address the negative consequences of cancer disparities in the population served with the inclusion of examples of pilot clinical trials research projects, and 2) the articulation of the steps to be taken with potential partner institutions during the first year of the award to develop a comprehensive and supportive partnership relationship and the subsequent implementation of that plan over the remaining life of the grant with the selected partner. The expectation is that successful Cancer Disparities Research Partnership projects will ultimately be competitively funded grants (e.g., R03, R01, project on a P01, project on a P50).

The NCI is strongly committed to reducing cancer-related health disparities across the cancer control continuum from prevention to end-of-life. The NCI's Strategic Plan to Reduce Health Disparities can be viewed online at <http://www.cancer.gov/announcements/healthdisp.html>. The NCI supports research to understand the complex causes of disparities in cancer risk, incidence, and mortality, including socioeconomic, cultural, environmental, institutional, behavioral, biologic, and other contributing factors seen in the health care delivery system. The overall goal is to understand the causes of health disparities and to develop effective interventions to eliminate these disparities that result in significant negative outcomes. More research is needed that specifically addresses these and other cancer disparities if these trends are to be reduced and brought into balance with the rest of the population.

The NCI and the Radiation Research Program (RRP) anticipate making up to three 5-year grant awards in fiscal year 2002. The NCI/RRP plans to set aside \$2.1 million for the initial year's funding,

which includes direct costs, costs for facilities and administration, and one-time capital equipment costs. Excluding one-time capital costs expended in the first year, applicants may request a budget for direct costs of up to an average of \$400,000 per year over the 5 years of the grant. The total project period for applications submitted in response to this RFA may not exceed 5 years. The anticipated award date is 20 September 2002.

The deadline for letters of intent is 6 February 2002, with final applications due 13 March 2002. Further information on this RFA is available online at <http://grants.nih.gov/grants/guide/rfa-files/RFA-CA-02-002.html>.

Contact: Frank Govern, Radiation Oncology Sciences Program, NCI, Executive Plaza North, 6015A, 6130 Executive Boulevard, MSC 7440, Bethesda, MD 20892-7440 USA, 301-496-6111, fax: 301-480-5785, e-mail: [governfr@mail.nih.gov](mailto:governfr@mail.nih.gov); Norman Coleman, Radiation Oncology Sciences Program, NCI, DCTD, RRP, Executive Plaza North, 6015A, 6130 Executive Boulevard, MSC 7440, Bethesda, MD 20892-7440 USA, 301-496-6111, fax: 301-480-5785, e-mail: [ccoleman@mail.nih.gov](mailto:ccoleman@mail.nih.gov). Reference: RFA No. RFA-CA-02-002

#### Child Health Research Career Development Awards

The National Institute of Child Health and Human Development (NICHD) supports a program of Child Health Research Career Development Awards (CHRCDA) intended to develop resources to speed the transfer of knowledge gained through studies in basic science to clinical applications that will benefit the health of children. The CHRCDA will support research career development of pediatricians who have recently completed subspecialty training and who are commencing basic and/or clinical research relevant to child health. The goal of this initiative is to advance research in child health and to support educational institutions in their ability to stimulate novel research initiatives and career development experiences for junior investigators. This will be accomplished by increasing the number and effectiveness of established pediatric investigators who have a grounding in basic science and research skills that can be applied to the health problems of children, as well as by increasing the number of pediatric medical centers that can stimulate and facilitate the application of research findings to pressing pediatric problems.

A CHRCDA grant provides pediatric research institutions with an opportunity to build a greater capacity for nurturing junior investigators. Individuals with a wide range of biomedical and biobehavioral backgrounds, especially those with a basic science orientation, are asked to mentor newly trained pediatricians just embarking on their research careers. The established investigators make available their expertise, guidance, and laboratory facilities to be utilized by junior investigators for research projects that will enhance their basic science knowledge and skills. Although mentors from collaborating departments may provide expertise and resources, the emphasis remains on research that is relevant to clinical pediatrics and its various subspecialty areas.

Applications from institutions not previously funded for CHRCDA are encouraged. A CHRCDA may be awarded to a children's hospital or to a

department of pediatrics of an approved medical school in the United States that has as a primary teaching site either a general children's hospital or a children's program with an identifiable organizational structure that is part of a larger medical institution. Grantee institutions must have the clinical pediatric specialties and subspecialties, and the discrete clinical and research facilities sufficient to meet the purposes of the CHRCDA program, namely, to bridge clinical pediatric training with a career in basic and/or clinical research relevant to child health. CHRCDA scholars must have an M.D. degree or equivalent, must have completed a pediatric residency and subspecialty training, and must be within three years of completing their subspecialty training when starting the program. Scholars must be willing to spend 75% of full-time professional effort conducting research and research career development activities. Scholars must be U.S. citizens or noncitizen nationals, or must be able to provide legal proof of lawful admission for permanent residence. Individuals on temporary or student visas are not eligible.

This request for applications will use the NIH Mentored Clinical Scientist Development Program (K12) award mechanism. Responsibility for the planning, direction, and execution of the proposed program will be solely that of the applicant. The NICHD intends to commit approximately \$3.2 million in total costs in fiscal year 2003 to fund up to eight new and/or competing continuation grants. Applicants may request a project period of up to five years and a budget of up to \$400,000 for direct costs per year. It is not required that applications request the allowable budgetary maximum. Small size is not a disadvantage for CHRCDA funding, if the support requested for core resources (administration, shared core laboratory) is in proportion to the activity in new project development that is the CHRCDA's primary purpose.

The deadline for letters of intent is 25 January 2002, with final applications due 26 February 2002. Further information is available online at <http://grants.nih.gov/grants/guide/rfa-files/RFA-HD-01-019.html>. The PHS 398 research grant application instructions and forms (rev. 5/2001) at <http://grants.nih.gov/grants/funding/phs398/phs398.html> are to be used in applying for these grants. For further assistance call 301-435-0714 or e-mail [GrantsInfo@nih.gov](mailto:GrantsInfo@nih.gov).

Contact: Karen K. Winer, Center for Research for Mothers and Children, NICHD, 6100 Executive Boulevard, Room 4B11, MSC 7510, Bethesda, MD 20892-7510 USA, 301-435-6877, fax: 301-480-9791, e-mail: [winerk@exchange.nih.gov](mailto:winerk@exchange.nih.gov). Reference: RFA No. RFA-HD-01-019